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LETTERS TO THE EDITOR



[*The Editor is not responsible for opinions expressed in this Department.*]

TUBERCULOSIS DISTRICT WORK.

DEAR EDITOR: Will you please tell me through the JOURNAL just how to begin tuberculosis district work? Or perhaps some nurse will be kind enough to tell me of some experience she has had.

K. L.

[An answer to this inquiry may be found by consulting Miss Waters' book, "Visiting Nursing in the United States," published by the Charities Publication Committee, 105 East 22nd Street, New York. We shall be glad also to publish in our Visiting Nurse Department replies to this question.—Ed.]

PRECAUTION UNHEEDED.

DEAR EDITOR: I should like to know through the JOURNAL if a family having some one in the house who has chronic bronchitis and also chronic catarrh is not justified in keeping dishes and drinking cups separate from those used by others. And I should like some information as to how one is to keep such a person from spitting any and everywhere, especially as he persistently refuses to comply with all requests as to the disposal of sputum.

A. H. R.

DELEGATES' EXPENSES.

DEAR EDITOR: I was interested in the "Expenses of One Delegate" in the December JOURNAL. I have always found that many precious minutes of the crowded convention days are wasted in waiting for cars and in waiting to be served in hotel dining rooms, so at the San Francisco convention I tried a new plan. I arrived a day early and went from the train to the neighborhood of the hall and selected a nice room with two beds in a private home, one-half block from where the meetings were held. The room cost five dollars a week and I shared it with another delegate. We took our meals in restaurants nearby and saved both time and money.

The following is the account of my expenses, covering one week:

Railway ticket.....	\$26.50
Pullman	2.50
Car fare.....	.45
Baggage	2.50
Room	2.50
Board	5.25
Trip to Tamalpais.....	2.00

\$41.70

M. A. P.

OBSTETRICAL DIET LISTS.

DEAR EDITOR: In your next month's JOURNAL, would you kindly give a two weeks' suitable diet, starting with liquid and ending with full diet, for an obstetrical patient or, in other words, will you give a menu for each day?

E. L. B.

[Replies from obstetrical nurses received before February 12 will be embodied in an article on the subject in the March JOURNAL.—ED.]

NEW USE FOR A PAP SPOON.

DEAR EDITOR: One of the best suggestions offered me by the superintendent of nurses when I was leaving the hospital to commence private nursing was that I should subscribe to THE AMERICAN JOURNAL OF NURSING. I want to tell you how much it has meant to me during the year, it has come to help me with several of my cases. My first was an obstetrical case, and a nice concise list of articles needed at such a time was a great help to me. Another edition brought an article, "How to Care for a Fractured Femur in a Private House." This was what I was doing at that time.

I would like it if more nurses would give their experiences in private nursing. It is interesting to read of some of them in the JOURNAL.

I find a baby's pap spoon a useful article in my bag; it makes a nice steady spoon for hypodermics, as the handle is inverted.

Wishing the readers of the JOURNAL a successful New Year, and the JOURNAL the same,

LOUISE HISBIT HAZLEHURST, R.N.

OPERATIONS ON MALE PATIENTS.

DEAR EDITOR: What is the custom of nurses doing hospital work during operations on male patients where, of necessity, the genital organs are exposed, especially those nurses assisting surgeons? Will the nurses of Ohio especially answer, also lady superintendents of our main hospitals?

I know what attitude to take, myself, but I have been told that my stand is radical and that it is customary for nurses in Cleveland and Columbus to assist and, in fact, to wait upon male patients regardless of exposure. While I do not credit this statement, I should like to be able to produce the protest of a number of nurses who, I am sure, feel as I do.

What number of hours do the nurses of the middle states consider right to ask for themselves when doing private duty?

M. M.

A REPLY FROM OHIO.

DEAR EDITOR: In answer to the question asked in regard to nurses being present at operations upon male patients, I wish to say that in one of our operating rooms all "screen" cases are regarded as such, and the nurse does not go behind the screen at all during the operation. In another operating room the nurses are present at every operation, the scrubbing up of the patient, however, is done in the anæsthetic room without the presence of the nurse. When the bandages are put on a "screen" case after the operation, the nurse usually either leaves the room or the patient, on the table, is wheeled out of the room, and the bandage applied in the adjoining room.